

DoD Space Planning Criteria for Health Facilities

Food Service

5.1.1. PURPOSE AND SCOPE:

This section provides guidance for the space planning criteria for food service activities in DoD medical facilities.

5.1.2.1. DEFINITIONS:

Administration - Includes office space for the administrators of the Food Service, their assistants, supervisory personnel, and clerical and technical support personnel. It includes space for private and group patient consultation and food service conference/training/rooms as appropriate.

Cafeteria Serving Facilities - Includes all space and equipment required for foods that can be quickly prepared and served (short order); and the holding and serving of all food and beverages required and so arranged and presented that the patron can make his/her choice of individual items (cafeteria). This includes the cafeteria serving line, short order preparation and serving facility, salad bars, beverage stations, backup units, checker/cashier stations, and access or circulation space related to their use. Also, facilities for the service of therapeutic diets to ambulatory patients are included.

Circulation Space - Includes all space designed to provide circulation among various hospital units including necessary shaft and stairway space. The food service criteria are based on the assumption that all elements of the food service, with specific exception of areas located on nursing floors, are located contiguously on one floor in one block of space. Within this block of space, all necessary circulation has been provided for all elements of the food service, which are contiguous. If any element of the food service is not entered directly from other elements of the food service, traffic aisle and access will be provided from general building "circulation space." It is expected that general building circulation space will connect the following points to the rest of the hospital as public corridor or as space within the food service area:

- Beginning of cafeteria serving line or lines.
- End of patient tray assembly line or point from which carts leave for nursing units.
- The point at which soiled dishes are delivered to the dishwashing area.
- Exits from cafeteria.
- Administrative areas.
- Locker areas.
- Storage areas.

Dining Room - The net floor area for dining tables and chairs, circulation space including access and other aisles, tray stands, and service or busing carts if utilized. Items such as salad bars, condiment and silverware dispensing equipment, and beverage stations, even if located in the dining room area, are included as part of the space allocation for the cafeteria serving facilities. The "dining room" does not include soiled dish collection even if located in the dining room; this function is by definition included in "Sanitation."

Dry Stores - Those food items, which may be stored without refrigeration. In some geographic locations, temperature and humidity control may be required.

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Food Processing and Preparation Facilities - Food processing and preparation includes the total of all activities from the time ingredients are withdrawn from storage until the prepared menu items are brought to point of service. The food processing and preparation areas include the following centers:

- Meat Preparation
- Fruit/Vegetable Preparation
- Pastry Preparation
- Special therapeutic Preparation
- Steam
- Fry
- Grill and Broil
- Baking and Roasting
- Mixing
- Therapeutic Diet Preparation
- Salad Assembly and/or Portioning
- Dessert Assembly and/or Portioning
- Patient Tray Assembly.

Food Service Facilities - For the purpose of these criteria, Food Service Facilities include the space required for the nutritional care of all patients and all individuals authorized to subsist. The criteria provide space for cafeteria service, patient tray service, sanitation, food processing and preparation, ingredient room, receiving and storage facilities, dining room, administration, and staff facilities. These criteria apply only to hospital food service activities financed from appropriated funds.

Frozen Stores - Those food items requiring subzero (-29 degrees C (-20 degrees F)) storage temperatures.

Ingredient Room - An area where specified quantities of dry ingredients, fresh fruits and vegetables, and meat items required for food preparation are weighed, measured, packaged, and assembled according to standardized recipes. This area is optional: except at Navy facilities, prep areas are more commonly located within the kitchen open area.

Nonfood Stores - Those nonfood items/supplies required by food service. Nonfood stores include such items as cleaning agents, disposable dishes, permanent dishware, blank forms, utensils, small equipment, diet kits, etc.

Nourishment Centers/Galleys/Pantries - Dedicated areas on nursing units that are designed and equipped for use by patients. This includes limited, refrigeration, and a microwave and ice making equipment.

Patient Tray Service - Includes all space and equipment required for the online preparation of foods and the holding, and assembly of all food and beverage items for patient nursing units. It includes space for online food preparation equipment, the tray assembly area, backup units, cart storage area, and mechanized assembly system.

Peak Meals – Maximum number of meals (i.e. either breakfast, lunch or dinner) served in a day. Normally, peak meals are the lunch serving, when food is prepared for both inpatient meals and cafeteria/dining meals.

Ration - One ration equals three inpatient meals per day (typically breakfast + lunch + dinner).

Receiving and Storage Facilities - Includes all functional areas used by food service to receive, inspect, verify, and accept deliveries of food and nonfood supplies, and the storage and issue of these items.

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Receiving and storage facilities include space required for receiving and storekeeper, dry stores, refrigerated stores, frozen stores, and nonfood storage. A refrigeration equipment (mechanical) room is also included, but is most often located outside; either on the ground on a concrete pad, or on the roof .

Refrigerated Stores – Area for those food items that must be maintained within an approximate temperature range of 34 degrees - 40 degrees F (1 degree - 4 degrees C). Thawing or tempering of frozen items must also be accomplished within this temperature range.

Sanitation - Includes all space and equipment required for soiled dish collection, dishwashing, central detergent dispensing, storage for clean dishes, soiled pot and pan collection, pot and pan washing, storage of clean pots and pans, trash disposal, janitors' closets, and cart wash.

Scramble System – Instead of a straight food dispensing area, a nontraditional food dispensing area that uses multiple food serving stations. (e.g. Salad Bar, Hot Food Line, Dessert Line, Sandwich Line, and Beverage Island). System sometimes referred to as Scatter system.

Staff Support Facilities - The space required for toilets, showers, lockers, and lounges for both professional and nonprofessional food service staff. It would include any toilet facilities designated for the "Administration" section.

5.1.3. POLICIES:

Criteria have been developed with the objective of providing high quality food service to patients and authorized individuals. At minimum, quality hospital food service is interpreted as nutritious food in sufficient quantity with consideration for regular and therapeutic requirements, prepared in accordance with the highest sanitation standards from standardized recipes; and attractively served at optimum temperatures, within normal or prescribed meal hours, in a pleasant environment and at the allotted costs.

Planning and programming construction or modernization projects involving hospital food service facilities will reflect the "state of the art" equipment and design. Maximum emphasis will also be given to energy conservation measures in the design.

Hospital food service facilities shall be planned to provide the desired quality of food at the lowest life cycle cost. The total cost includes the costs of the building, equipment, labor, energy and utilities, supplies, and depreciation required to support food service, and related activities.

Construction or modernization projects will be planned and developed on the basis of centralizing all food preparation in one location where possible and economically feasible.

If a facility has less than 25 beds, then a dining hall will not be provided without special justification. Regardless of size, all facilities should perform a study to determine if food services are required.

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The following policy statements are listed in relation to the specific facilities to which they apply:

Cafeteria Serving Facilities:

Cafeteria Serving Facilities include all equipment and space required for the short order preparation and holding and serving of all foods and beverages required. In the smallest facilities the cafeteria serving line may be designed with two parallel lines with the tray rails facing each other. The cafeteria serving area may be subdivided to separate regular kitchen prepared and served items; short order prepared and service items; and therapeutic diet items for ambulatory patients.

Depending upon agency policy, a scramble or modified scramble system may be utilized when determined feasible. Self service items such as salads, beverages, and ice cream may be physically removed from the serving lines and be established as separate stations in the cafeteria serving area. At the upper limits of the planning criteria for the cafeteria serving line(s) the scramble system was used in determining the number of square feet.

The method of payment should be determined in advance of designing the serving area: an “a la carte” system, a scramble system, or a point of sale system. An ala carte system places the cashier at the exit of the serving line, since patrons pay item-by-item. A point of sale system, or one price per meal regardless of quantity, allows the cashier to be moved to the entrance of the service line. A scramble system can have cashiers at each area or at the exit of the serving line. The type of system needs to be determined prior to the design layout.

It should be determined if there will be a “take-out” service provided. These patrons need to be discounted from the seating area. It should be determined if take out items are limited to pre-packaged sandwiches, subs and salads, or whether warm meals in Styrofoam clamshells will also be offered. Either way, the amount of additional space will only involve adding an area for an open face merchandiser cabinet.

Refer to Section 5.8 for criteria information regarding food service vendors beyond the full service cafeteria setting, such as area for vendor space (i.e. McDonalds, Starbucks, etc.), vending machines, and grill/snack bar services.

Cafeteria serving facilities and dining rooms should be designed in such a way that the following can be realized:

a. Entry and exit points will be designed to provide maximum security, control, and accountability. There should be only one entry and one exit point to the serving lines. This enables the cashiers to have better control of patrons.

b. Compliance with all handicapped accessibility regulations, including the “American Disabilities Act.” Specifically, ensure that 5% of all seating areas accessible; this may require tables that raise and lower, additional floor area, etc.

Patient Tray Service Facilities:

All patients should be served complete meals at acceptable temperature (hot food above 140 degrees F (60 degrees C) and cold food below 45 degrees F (7 degrees C)). These temperatures apply to point of consumption and not the point of assembly. Particular precaution should be taken in this area to provide adequate and convenient backup refrigeration for portioned items so that food items can be replenished frequently and maintained at proper temperatures during assembly.

Each agency will have the option of selecting the type of tray service to be used on an individual project basis (i.e., single tray controlled temperature carts, pellet system to retain temperature, mechanical conveyor, bulk food carts, etc.).

Patient tray service facilities are to be designed to serve selective and nonselective regular and therapeutic menus.

Space for nourishment centers in ward areas is listed below. Refer to Section 4.1 for all other nursing unit criteria.

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Facilities shall have the option of either line or carousel equipment for tray service. Where volume exceeds maximum, then a second line can be established. Hospital lines typically assemble 6 to 9 trays per minute.

Sanitation Facilities:

Dish rooms: Dish rooms should be designed and equipped to provide for the collection of all soiled dishes from dining rooms and nursing units. Adequate access from dining rooms and service elevators must be provided for optimum flow of dishes. Where possible and economically feasible, all dishwashing will be performed in a single centralized area. The dishwashing period should not exceed three hours for any meal.

Cart Holding Space: Holding space of 1/4 the number of food carts must be provided in, or adjacent to, the dishroom. Agency policy may determine whether conveyor belts or dish collecting carts will be used to move dishes from the dining rooms to the dish room.

Dish Machines: Stationary/manual rack type dish machines will be utilized in medical facilities with less than 76 beds, which usually do not have a staff feeding mission. Facilities serving up to 405 peak meals or with 76 - 175 beds may utilize the conveyor type rack machines. A flight type dish machine or conveyor (merry-go-round) type dish machine with blow dryer is authorized for those facilities with more than 175 beds or serving more than 405 peak meals. Agency policy may determine which type of machine(s) will be utilized.

Pot Washing Area: Facilities serving less than 276 peak meals or with less than 126 beds should have dishwashing and pot washing in the same room utilizing a common clean table for the dish machine and clean pot draining and drying. Facilities serving more than 276 peak meals or with more than 126 beds should have a designated alcove close to food preparation for pot and pan washing. An automated pot and pan machine is provided for facilities serving more than 276 peak meals.

Garbage Disposal: Garbage disposals will be provided in the soiled dish collecting table, soiled pot collection table, and fresh fruit & vegetable processing. An automated pot and pan machine is provided for facilities serving more than 276 peak meals.

Trash Compactors: Compacting mechanisms should be provided on outside dumpsters at back docks. If a compactor is provided on the dumpster, the requirement for a compactor in the storeroom may be deleted. Requirements for refrigerated garbage rooms and garbage can washrooms, will require special justification

Pulper Grinder Extractor Systems: Pulper grinder extractor systems are authorized where local environmental laws allow them.

Cart Washing Area: Cart washing area should ideally be located between the dish room and cart storage. The cart wash area can be utilized to wash food carts, dish dispensers, angle ledge racks, and platform trucks.

All medical facilities may have manual cart wash areas or a steam gun area. Facilities with less than 175 beds are not authorized an automatic cart washing machine. Depending upon agency policy, medical facilities with 175 beds or over may have a pass through (automatic) cart wash machine, but may opt to provide a manual cart wash and/or steam gun area.

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Janitor's Closet: Janitor's alcove/closet will be provided in the kitchen and dish room, dining room, serving line and back dock areas. See Section 6.1 for additional information.

Food Processing and Preparation Facilities:

The food processing and preparation facilities operate according to the functional relationship set forth in the definition. Equipment utilized will be specified for the size of the facility to optimize "batch cookery" thereby promoting a high level of food quality. Separate space requirements for each center will not be necessary in all cases. The operational work load will dictate joint utilization of various equipment items. The criteria are based on designs, which maximize use of open areas and minimize the use of walls and partitions to provide flexibility and economy.

The centers in food processing and preparation should be established according to the following criteria:

Meat Preparation: Meat processing may be done in all medical facilities. Meat cutting (processing) rooms must be maintained at temperatures not to exceed 55 degrees F (13 degrees C). Normally, portioned meats only are used in facilities with less than 175 beds. Factors influencing agency policy include availability, economy, volume, and quality.

Pastry Preparation: Pastry items can be produced in all medical facilities. Depending on agency policy and availability, some prepared pastry items may be procured locally; however, all kitchens still require a bake prep area.

Therapeutic Diet Preparation: Since the preparation of hot, therapeutic diet food is different from regular hot food preparation, an area of food processing must be allocated. In smaller facilities with 125 beds or less, much of the equipment can be used jointly. For facilities with more than 125 beds, a separately equipped area will be designated for therapeutic diet preparation.

Steam: Since this center is an area where steam is utilized to cook various menu items, it is imperative that an adequate supply of "clean" steam, which contains no boiler treatment compounds, be available. If clean steam is not readily available, equipment, with steam heated coils, shall be provided.

Fry: Conventional fryers with or without automatic basket lifts are utilized in all medical facilities. Pressure fryers should be used in facilities over 175 beds.

Grill and Broil: Conventional griddles and broilers or char-broilers and conveyor broilers are authorized in all medical facilities.

Baking and Roasting: For determining space requirements in the planning criteria, conventional roasting and baking ovens are used. The use of other types of ovens may depend upon agency policy and should be reflected in each agency's equipment authorization tables.

Mixing: Medical facilities are authorized mixers (automatic) with all standard attachments/adapters including the meat grinder, chopper, and interchangeable hubs.

Fresh Fruit and Vegetable Preparation: Space and equipment must be allocated for this center in all medical facilities. Fresh fruit and vegetable processing center is utilized for cleaning, chopping, slicing, dicing, of all fresh fruits and vegetables used in hospital food service. Depending upon agency policy and physical constraints, this center's space allocation may be combined with the ingredient room or combined with the salad assembly and portioning center.

Salad Assembly and Portioning: Space will be provided in each medical facility for the assembly and portioning of all salads. When ingredients in an already processed state are received from either an ingredient room, subsistence storage area, and/or fresh fruit and vegetable processing center, no major

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equipment other than a work site (table) will be required. When there is no ingredient room, the space allocated for this center will be combined with the fresh fruit and vegetable center.

Dessert Assembly and Portioning: In all medical facilities that do not prepare pastry items, an equipped area must be allocated for this center. Depending upon physical constraints and layout, medical facilities with less than 175 beds that prepare pastry will use space jointly for dessert assembly and portioning and pastry center or any other feasible area within the food processing and preparation facility. In medical facilities of 175 beds or greater that prepare pastry, a separately equipped area for dessert assembly and portioning will be provided. This separately equipped area may be included within the pastry center or any other feasible area within the food processing and preparation facility.

Beverage Dispensing: Provide a centralized carbonated beverage dispensing room in all new medical facilities.

Ingredient Room:

Depending upon agency policy, an ingredient room may be utilized to introduce an additional element of control into the total food production process. The ingredient room serves as the coordination link between dry food storage, meat processing, fresh fruit/vegetable processing and actual food production; it should be located so as to facilitate a smooth flow of materials between these functional areas. Generally, the ingredient room works best if it is physically located in conjunction with dry food storage, meat processing, and fresh fruit/vegetable processing. It can also be part of the open kitchen area. The ingredient room must have the capability for holding assembled recipe components in a refrigerated or non-refrigerated environment as required prior to dispatch to the food production area(s). The ingredient room must be equipped with a hot/cold water supply and an appropriate variety of weighing and measuring devices in addition to work table(s), delivery carts, ingredient bins, etc.

Receiving and Storage Facilities:

The receiving and storage facilities will be planned on the basis of the supply system of the agency concerned and should provide for the most economical cost considering purchase prices, freight rates, handling costs, and costs of building and operating storage facilities. Receiving and storage facilities will be designed to provide maximum security and accountability of inventory items.

Refrigerated units should be constructed and insulated in such a way that they may be converted to frozen storage if the need arises.

A dedicated covered loading dock will be provided. The dock should be located adjacent to the receiving/storekeeper areas and should facilitate easy movement of supply and materials into storage or usage areas. Depending upon agency policy, dock leveling devices may be provided.

In certain geographic areas, temperature and humidity controls may be required in dry food storage.

Depending upon agency policy, movable carriage shelving systems may be used in nonfood and dry food storage areas. These systems provide for more efficient use of allocated storage space. Gravity flow shelving may also be used where feasible.

Although nonfood storage provides space for various chemicals, cleaning compounds, and detergents, a separate area (without exceeding total square footage for nonfood storage) should be designated for this category of items. Separation will minimize the chance for these potentially hazardous items coming in contact with subsistence supplies or disposable dinnerware.

Dining Room:

The dining room should be designed consistent with the hospital mission, economy, and state-of-the-art in interior furnishings. To the maximum extent feasible, patients are encouraged to eat in the dining room rather than on the nursing unit. The dining room should be located convenient to the hospital traffic flow,

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contiguous to elevators and main corridor circulation. Depending upon agency policy, the dining room may have windows with a view to the outside environment. Depending upon agency policy, dining rooms may be subdivided into areas for professional staff dining and/or dining/conference room.

Administration:

Space allotted for administration may be subdivided to achieve the best functional design according to agency policy. Offices will be arranged so as to achieve the most efficient use of clerical and receptionist personnel in line with mission or objectives.

Space must be dedicated for private and group patient consultation. The nutrition clinic and weighing/screening/waiting area provided for this purpose is located in the food service administration area. It should be convenient to hospital main corridor circulation so that patient traffic in food service, per se, is minimized. At facilities over 175 beds, a second nutrition clinic and weighing/screening/weighing area is authorized and is in the outpatient clinic.

Food service conference/training rooms may be authorized in hospitals with more than 175 beds, depending upon agency policy. Additionally, hospitals with an education and training mission (i.e., dietetic internship) are authorized a conference/training room.

Staff Facilities:

Staff facilities must be provided to accommodate the total number of individuals (both military and civilian) indicated in the staffing table. Design should be in accordance with agency health and environment regulations and standards. Agency policy may determine the physical location and grouping of staff facilities relative to the remainder of the food service operation. For example, a separate toilet facility may be designated for the administration area as long as total staff facility's space is not exceeded. Also, lockers, toilets, and showers for professional and nonprofessional staff may be located separately. See Section 6 for additional information.

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5.1.4 PROGRAM DATA REQUIRED:

The data shown in the following table is needed by planners for application of the planning criteria and should be developed for both actual experience and planned program:

Planned

Number of Meals Served

a. Patient Tray Service - Determine the number of daily peak meals served on the nursing units over a 90-day period. Out of these 90 peak meal values, select the 30 largest and calculate their average (include meals served to ambulatory patients, same day service in this amount).

_____(1a)

b. Main Dining Room and Cafeteria - Determine the number of daily peak meals served in all dining rooms and cafeterias over a 90-day period. Out of these 90 peak meal values, select the 30 largest peak meal values and calculate their average (include "take-out" meals served in this amount).

_____(1b)

c. Total Peak Meals (a. + b. = c.)

_____(1c)

d. Average Peak Meals (c/30)

_____(1d)

Number of Rations Served:

a. The sum of the total number of meals served during any consecutive 30-day period of the previous 12 months. Include "take-out" meals served in this number.

_____(2a)

b. Average ration (a ration = breakfast meal + lunch meal + dinner meal) served per day. (Above divided by 90)

_____(2b)

When planned program data differ from actual experience data, an explanation should be provided.

Examples of such explanations might be that the planned number of meals is based on actual meals served adjusted for a change in the bed capacity of the hospital, or the effect of a new location, or a change in the composition of the patient load. For new (not replacement) hospitals, the explanation may be based on factors from comparable existing facilities.

Based upon the previous information, the following program data elements need to be calculated using the indicated formulas.

Patient Trays:

No. of trays to be assembled (3) = Number of inpatient beds x 75% (non-ambulatory patients.)

Patient Tray Carts:

No. of Carts (4) = Average Peak Meals served by tray service/20 trays per cart.

The number of delivery carts must at least equal the number of nursing units, to ensure one cart per nursing unit.

Seating:

Dining room seats (5)

= Avg. peak meals dining room service (1d, less "take out" meals served)/number of sittings

(See table following):

No. of regular seats = .95 x (5) (5a)

No. of handicapped seats = .05 x (5) (5b)

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The number of sittings for various work loads in the dining room is as follows:

Planned Average Peak Meals:

<u>Meals Served in Cafeteria</u>	<u>No. of Sittings</u>
1 -200	1.5
201 - 400	2.0
401 - 550	2.5

Serving line:

Will a conventional straight service line be used versus a scramble system?

Will payment be “a la carte”, point of sale, scramble, or any combination of these?

Storage:

Number of weeks (average) for dry food items?

Number of weeks (average) for non-food items?

Number of days (average) for refrigerated food items?

5.1.5. SPACE CRITERIA:

The following criteria have been developed on the basis of the labor, space, and equipment requirements. The criteria is for conventional food service.

Flexibility Incorporated in the Criteria:

The wide variation in systems encountered in the hospitals makes it necessary to use a flexible concept of planning so that all systems, which have merit, can be accommodated within the criteria.

There is no requirement within the criteria that actual designs of food service facilities adhere rigidly to allocations of space by functional units. Space may be shifted from one unit to another to facilitate the development of a good functional design. However, the total space provided in a design for food service facilities should not exceed the sum of the allocations of space set forth below for all of the functional units of food service.

Workload Break Point Criteria:

Based upon a comparison of workload data among the agencies with DoD, the following table was developed as criteria for workload break points in various size medical treatment facilities:

Constructed Beds in the Medical Treatment Facility	25-75	76-125	126-175	176-350	351-550
Max. Number of Trays Assembled for Nursing Unit Patients at the Peak (Noon) Meal (60% of total beds)	15-45	45-75	76-105	106-280	281-330
Max number of Meals Served in the Dining Room (Noon) Meal	95-125	126-200	201-300	301-600	601-940
Max. Number of Meals Served at the Peak (Noon) Meal	110-170	171-275	276-405	406-880	881-1270
Avg. Number of Rations Served Each Day	65-125	126-190	191-255	256-465	466-580

NOTE: GP indicates that a guideplate exists for that particular Room Code.

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FUNCTION	Room Code	AUTHORIZED		PLANNING RANGE/COMMENTS
		m ²	nsf	

CAFETERIA:				Where the physical plant of an existing hospital makes it impossible to treat the entire hospital as one centralized unit, space requirements may be computed individually for each separate unit. <u>Note:</u> Indicated calculation number “5” from section 5.1.4.
Cafeteria Serving	FSSL1	18.58	200	Minimum. Maximum 5,000 nsf. Number of seats x 7 NSF per seat (see section 5.1.4 seating). Increase area by 140% if a scramble system is used. This includes area for take-out service.
Dining Room	FSCD1	1.67	18	X number of regular seats PLUS X number of handicapped seats (see section 5.1.4 seating).
Snack Bar, Vending Area	BX001			See Section 6.1.

PATIENT TRAY SERVICE:				Select either Line Tray Service or Carousel Tray Service, but not both.
Line	FSPT1	23.23	250	Minimum. 1000 nsf maximum. Number of trays to be assembled x 4.5 NSF per tray (See section 5.1.4 patient trays).
Carousel	FSPT2	20.44	220	Minimum. 800 nsf maximum. 3.6 nsf x number of trays to be assembled (See section 5.1.4 patient trays).
Cart Storage	FSCS1	0.93	10	Minimum. 10 X number of Patient Tray Carts (See section 5.1.4 patient tray carts).

SANITATION:				
Dishwashing, dish collection.	FSDW1	24.15	260	Minimum. 1200 nsf maximum. Planned Average peak meals served (1d) x 1 NSF per meal.
Pot Washing Center	FSPW1	13.94	150	Minimum. 500 nsf maximum. Average peak meals served (1d) x 1 NSF per meal. NOTE: The escalation of space based on average peak meals will accommodate the space required for an automatic pot washer in facilities serving greater than 276 meals.
Dish Storage Area	FSDS1	7.43	80	Holding area for immediately after washed

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FUNCTION	Room Code	AUTHORIZED		PLANNING RANGE/COMMENTS
		m ²	nsf	

FOOD PROCESSING AND PREPARATION:		The areas listed below are based on planned average peak meals as listed in "1d" in Section 5.1.4 above.									
		Average Number of Peak Meals									
		100-250		251-400		401-880		881-1620		> 1620	
		m²	nsf	m²	nsf	m²	nsf	m²	nsf	m²	nsf
Meat Preparation	FSMP1	13.94	150	13.94	150	35.30	380	37.16	400	50.17	540
Pastry Preparation	FSPP1	0	0	20.44	220	54.81	590	70.60	760	136.56	1470
Hot Food Production:											
Fry Center	FSFC1	4.65	50	4.65	50	6.50	70	11.61	125	14.40	155
Grill/Broil Center	FSGB1	8.36	90	8.36	90	13.94	150	18.58	200	28.80	310
Bake/Roast Center	FSBR1	10.22	110	10.22	110	21.57	230	24.15	260	32.52	350
Steam Center	FSSC1	5.57	60	16.26	175	25.08	270	26.94	290	39.02	420
Mixing Center	FSMC1	2.78	30	2.78	30	2.78	30	5.57	60	7.43	80
Therapeutic Diet Prep	FSTD1	0	0	4.65	50	4.65	50	6.97	75	6.97	75
Fruit/Vegetable Prep.	FSFV1	5.57	60	13.94	150	22.30	235	24.62	265	24.62	265
Salad Assembly & portioning	FSSA1	9.29	100	13.94	150	23.23	250	33.91	365	38.09	410
Dessert Assem./Portion.	FSDA1	1.86	20	1.86	20	6.50	70	9.29	100	15.79	170
Ingredient Room	FSIR1	7.43	80	12.08	120	11.15	130	17.65	190	23.23	250
Ice Machine	ICE01	1.86	20	3.72	40	3.72	40	7.43	80	7.43	80
Carb. Beverage Room	FSCB1	0	0	3.72	40	3.72	40	5.57	60	7.43	80

Small/isolated/overseas facilities may be addressed by special study.

SUPPORT AREAS				The areas listed below are based on number of carts listed as "4" in Section 5.1.4 above.
Cart Wash, Manual	CWSH1	11.15	120	Minimum. 150 nsf maximum. Number of carts x 10 NSF per cart. Facilities with less than 275 beds are not authorized an automatic cart washing machine.
Trashcan Decontamination Area	UTC02	11.15	120	One per food service area.
Utility, Trash Collection	UTC01	12.08	130	Minimum. Individual study required for greater than 400 meals per day.
Food Waste Storage	UTC01	3.72	40	Minimum < 881 APM. >880 than provide 80 nsf
Janitor Closet	JANC1	7.43	80	Dedicated Includes supply storage

STORAGE:				
Receiving/ Storekeeping	MMRP1	11.15	120	Minimum. Over 880 peak meals 200 nsf
Dish Storage Area	FSDS1	7.43	80	Minimum, over 880 peak meals 120 nsf
Dry Food Storage	SRS01	7.43	80	Minimum. 0.5 x Average Peak Meals (APM) maximum 600 nsf.
Non-food Storage	SRS01	7.43	80	Minimum. 0.2 nsf x APM. Maximum 350 nsf Storage for disposable dishes, blank forms, utensils, small equipment, diet kits, seasonal decorations, etc

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FUNCTION	Room Code	AUTHORIZED		PLANNING RANGE/COMMENTS
		m ²	nsf	

STORAGE (CONT):				
Walk-in Refrigerator	SRR01	9.29	100	Minimum. 0.5 nsf x APM.
Walk-in Freezer	SRF01	9.29	100	Minimum. 0.2 x APM
Refrigerator/Freezer Mechanical Area	RER01	7.43	80	Minimum < 881 APM. >880 provide 140 nsf
Flash Freezer	SRF01	7.43	80	Individual study where cook-chill process used.
Cleaning Products Storage	SRHM1	7.43	80	Minimum< 881 APM. >880 provide 160 nsf
Pots and pans, cart storage	SRS01	7.43	80	Minimum. 0.2 x Average Peak Meals (APM) maximum 200 nsf. Includes space for kitchen working carts
Equipment Storage	SRE01	9.29	100	Minimum< 881 APM. >880 provide 200 nsf.

ADMINISTRATION AREAS:				
Director, Food Service	OFA01	11.15	120	Private office, Standard Furniture per FTE programmed.
	OFA02	11.15	120	Private office, Systems Furniture
Secretary with Visitor Waiting	SEC01	11.15	120	Includes waiting space
NCOIC/LCPO/LPO/SMT Office	OFA01	11.15	120	Per FTE programmed.
	OFA02			
Conference/Training Room (GP)	CRA01	18.58	200	Minimum, one per service <880 APM
	CRA02	27.87	300	If providing 881-1620 APM
	CRA03	37.16	400	If providing >1620 APM
Administrative Cubicle	OFA03	5.57	60	System furniture Cubicles. Per FTE authorized. Refer to Chapter 2.1.
Copy Room	RPR01	11.15	120	One per department.
Clinical Dietetics	OFA03	5.57	60	One per FTE assigned
	OFA01	11.15	120	One per FTE if located within the clinics.
	OFA02			
Food Production Service	OFA03	5.57	60	One per FTE requiring desk space.
Education & Research Cubicle	OFA03	5.57	60	One per projected FTE intern (facilities with dietetic internship).

NUTRITION CLINIC:				
Dietitian's Office	OFA01	11.15	120	One per FTE dietitian.
	OFA02			
Height/Weight Screening	PEHW1	5.57	60	One per nutrition clinic.
Clinic Classroom	CLR02	18.58	200	One per nutrition clinic.
Forms/Literature Storage	SRS01	7.43	80	Minimum, one per nutrition clinic

DoD Space Planning Criteria for Health Facilities

Food Service

FUNCTION	Room Code	AUTHORIZED		PLANNING RANGE/COMMENTS
		m ²	nsf	

STAFF SUPPORT AREAS				
Staff Lounge (GP)	SL001	13.01	140	Minimum. See Section 6.1 for increase in size
Personal Property Lockers (GP)	LR001	1.86	20	For staff without a dedicated office/cubicle space. See Section 6.1 for increase in size or for Locker Room, Changing criteria.
Staff Toilets (GP)	TLTU1	4.65	50	Minimum for total clinic staff of at least 10. See Section 6.1 for increase in size and for male/female breakdown.

WARD SERVICE:				
Nourishment Center (GP)	NCWD1	9.29	100	See Section 4.1.